U.C. Department of Labor Office of Labor-Management Standards Washington, DC 20210

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official View Chiff
	AHG-82005
E	A MEL

1. File Number U- 5278

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

3. Name and address of person filing.			4. Name, file number, and address of labor organization.				
Name	Jeffrey	R LaBroski	Name	Plumbers AFL	-CIO Local Union 68		
			Labor	Organization File Nu	mber 039-449		
P.O. E	Box, Bldg., Room No., if any		P.O. B	lox, Building and Roc	m Number, if any po Box 8746		
Street	1802 Cotton Mill	Ct.	Street	502 Link Rd			
City	Richmond		City	Houston			
State	Техав	ZIP Code + 4 77469-2101	State	Texas	ZIP Code + 4 77249-8746		
5. Posit	ion in labor organization. I	resident and Organizer					
En	ter appropriate data below if,	during the past fiscal year, you or your spo (except as specified in the exclu					
		n transactions (including loans) with, or Mr whose employees your organization					
6. Nam	e and address of Employer (	ncluding trade name, if any).	7.a. Nat	ure of Interest, Transa	action, or Income.		
Name	Houston Area Plum	bing JAC	1/6/2004- Received reimbursement for expenses to attend UA Instructor Training in Ann Arbor MI.				
Trade	Name, if any:						
P.O. I	Box, Bidg., Room No., if any	PO Box 8653	7.b. Am	ount.			
Street	454 Link Rd.						
City	Houston		<u> </u>		\$46		
State	Texas	ZIP Code + 4 77249-8653					
		Sign	ature				
subn	nitted in this report (including	The undersigned declares, under penalty of the information contained in any accompany ief, true, correct, and complete. (See the se	ring docum	ents), has been exam	nined by the signatory and is, to the best of the		
Sign	red JR	<b>X</b>	On	8/3/2005	(281) 341-0895		
				Date	Telephone Number		
Form LN	1-30 (2003)				Page 1 of 9		

Name of Person Filing	Jeffrey LaBroski	File Number U-
-----------------------	------------------	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: a. Labor Organization Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street City State ZIP Code + 4 11.a. Nature of such dealing. 10, if 9.b, or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 11.b. Approximate dollar value of such dealing. City 12.a. Nature of interest held or income received. State ZIP Code + 4 12.b. Amount.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No. rif any	<b>.</b>			
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Jeffrey LaBroski

File Number U-

# Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.					
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.				
Name Houston Area Plumbing JAC	5/19/2004- Accidental Insurance coverage paid to Mass Benefits Consultants on my behalf				
Trade Name, if any:					
P.O. Box, Bidg., Room No., if any PO Box 8653					
	7.b. Amount.				
Street 454 Link Rd.					
City Houston	\$9				
State Texas ZIP Code + 4 77249-8653					

<ul> <li>A. Held an interest in, engaged in transactions (including loans) with, or employees your organization represents or is actively seeking to represe</li> </ul>	derived income or other economic benefit of monetary value from an employer whos ent.			
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.			
Name Houston Area Plumbing JAC	7/13/2004 - Received expense allowance for meals and/or class materials to attend UA INstructor Training in Ann Arbor, MI			
Trade Name, if any:				
P.O. Box, Bidg., Room No., if any PO Box 8653				
	7.b. Amount.			
Street 454 Link Rd.				
City Houston	\$ <del>4</del> 50			
State Texas ZIP Code + 4 77249-	8653			

A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose				
6. Name and address of Employer (including trade name if any).	7.a. Nature of interest, Transaction, or Income.				
Name Houston Area Plumbing JAC	7/30/2004- Application fee paid to National Labor College on my behalf				
Trade Name, if any:					
P.O. Box, Bidg., Room No., if any PO Box 8653					
Street 454 Link Rd.	7.b. Amount.				
City Houston	\$25				
State Texas ZIP Code + 4 77249-8653					

Name of Person Filing	Jeffrey	LaBroski
-----------------------	---------	----------

File Number U-

#### Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.			
Name Houston Area Plumbing JAC	7/30/2004- Airfare expense paid to attend UA Instructor Trainging in Ann Arbor, MI			
Trade Name, if any:				
P.O. Box, Bidg., Room No., if any PO Box 8653				
	7.b. Amount.			
Street 454 Link Rd.				
City Houston	\$287			
State Texas ZIP Code + 4 77249 - 8653				

. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	8/25/2004- Lodging expense paid to attend UA Instructor Training in Ann Arbor, MI
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any PO Box 8653	
	7.b. Amount.
Street 454 Link Rd.	
City Houston	\$540

A. Held an interest in, engaged in transactions (including loans) employees your organization represents or is actively seeking to	with, or derived income or other economic benefit of monetary value from an employer whose prepresent.
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	8/25/2004- Transportation expense paid to attend UA Instructor Training in Ann Arbor, MI
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any PO Box 8653	
Street 454 Link Rd.	7.b. Amount.
City Houston	\$139
State Texas ZIP Code + 4 7	7249-8653

Name of Person Filing	Jeffrey LaBros	ci		ļ	File Number U-	

A. Held an interest in, engaged in transactions (including loans) with, or derived i employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	8/25/2004- Meal expense for Instructor Training in Ann Arbor, MI
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any PO Box 8653	7.b. Amount.
Street 454 Link Rd.	7.D. ATROUIK
City Houston	\$50
State Texas ZIP Code + 4 77249 - 8653	

5. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	9/14/2004- Received reimbursement for expenses to attend UA Instructor Training in Ann Arbor, MI
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any PO Box 8653	
	7.b. Amount.
Street 454 Link Rd.	
City Houston	\$152
State Texas ZIP Code + 4 77249-8	nera.

6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or income.
Name Houston Area Plumbing JAC	1/30/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education classes
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any PO Box 8653	
.50 200	7.b. Amount.
Street 454 Link Rd.	
City Houston	\$40
Starte Texas ZIP Code + 4 77249-8653	

Name of Person Filing	Jeffrey LaBroski	File Number U-
-----------------------	------------------	----------------

A. Held an interest in, engaged in transactions (including loans) with, or derived in employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	3/26/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education classes
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any PO BOX 8653	
	7.b. Amount.
Street 454 Link Rd.	
City Houston	\$40
State Texas ZIP Code + 4 77249-8653	

<ol><li>Name and address of Employe</li></ol>	(including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area P.	umbing JAC	5/19/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education classes
Trade Name, if any:		
P.O. Box, Bidg., Room No., if a	ny PO Box 8653	
		7.b. Amount.
Street 454 Link Rd.		
City Houston		\$109
State Texas	ZIP Code + 4 77249-8653	

8. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	6/21/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education clases
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any PO Box 8653	
	7.b. Amount.
Street 454 Link Rd.	
City Houston	\$37
State Texas ZIP Code + 4 77249-8653	

Name of Person Filing	Jeffrey LaBroski		File Numbe	er U-	
Name of Person Filing	** 55 ··· * * ** * · * · * · * · * · * ·		File Numbe	or H.	
LASTING OF LASTON CHAIR	Jeffrey LaBroski		I AG ITUIID	B1 U-	

A. Held an interest in, engaged in transactions (including loans) with, or derived in employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	1/1/2004 - 12/31/2004- Wages for Kristi LaBroski (spouse)
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any PO BOX 8653	
	7.b. Amount.
Street 454 Link Rd.	
City Houston	\$39,998 
State Texas ZIP Code + 4 77249 - 8653	

6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name Houston Area Plumbing JAC	1/1/2004 - 12/31/2004 - Kristi LaBroski (spouse) UA Plumbers & Pipefitters National Pension Fund paid on her behalf
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any PO Box 8653	
	7.b. Amount.
Street 454 Link Rd.	
City Houston	\$5,272
State Texas ZIP Code + 4 77249-	8653

6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or income.
Name Houston Area Plumbing JAC	1/1/2004 - 12/31/2004- Kristi LaBroski (spouse) UA Local Union Officers & Employees Pension Fund paid on her behalf
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any PO Box 8653	7.b. Amount.
Street 454 Link Rd.	r.s. Patrounic
City Houston	\$5,749
State Texas ZIP Code + 4 77249-8653	

Name of Person Filing Jeffrey LaBroski

File Number U-

#### **Part A Continuation Page**

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 6. Name and address of Employer (including trade name if any). 1/1/2004 - 12/31/2004- Kristi LaBroski (spouse)UA Name Houston Area Plumbing JAC Local Union 68 Plumbers Trust Fund / Group protection paid on her behalf Trade Name, if any: P.O. Box, Bldg., Room No., If any PO Box 8653 7.b. Amount. Street 454 Link Rd. \$7.044 City Houston ZIP Code + 4 77249-8653 Texas

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 6. Name and address of Employer (including trade name if any). 1//1/2004 - 12/31/2004- Kristi LaBroski (spouse) UA Name Houston Area Plumbing JAC Local Union 68 Plumbers Trust Fund / Pension Trust paid on her behalf Trade Name, if any: P.O. Box, Bidg., Room No., if any PO Box 8653 7.b. Amount. Street 454 Link Rd. \$1,890 City Houston State ZIP Code + 4 77249-8653 Texas

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 6. Name and address of Employer (including trade name if any). 1/1/2004 - 12/31/2004- Kristi LaBroski (spouse) Name Houston Area Plumbing JAC Employer Taxes & Contributions / Federal Unemployment paid on her behalf Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 7.b. Amount. Street 454 Link Rd. \$56 City Houston ZIP Code + 4 77249-8653 State Техав

	<del> </del>
Name of Person Filing Jeffrey LaBroski	File Number U-

8. Name and address of Employer (including trade name if any).  Name Houston Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  CRY Houston State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeding to represent.  8. Name and address of Employer (including trade name if any).  Name Stout ton Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  CRy Houston State Texas ZIP Code + 4 77249-8653  The Amount.  7.b. Amount.  7.b. Amount.  7.b. Amount.  7.b. Amount.  7.c. Nature of interest, Transaction, or Income.  1.1/1/2004 - 12/31/2005- Kristi LaBronki (appuse)  Employer Taxee & Contributions / Social Security  paid on her behalf  7.b. Amount.  7.b. Amount.  7.c. Nature of interest, Transaction, or Income.  \$2,480  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  CRy  P.O. Box, Bidg., Room No., if any  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  The Amount.	A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
Replicer Taxes & Contributions / Medicare paid on her behalf	6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Trade Name, if any:  P.O. Box, Bidg., Room No., if any po Box 8653  Street 454 Link Rd.  CRY Houston  State Texas ZIPCode + 4 77249 - 8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  Name Houston Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  CRy Houston  State Texas ZIPCode + 4 77249 - 8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  7.b. Amount.	Name Houston Area Plumbing JAC	Emploer Taxes & Contributions / Medicare paid on
Street 454 Link Rd.  City Houston State Texas ZIP Code + 4 77249-8653  A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  Name Houston Area Plumbing JAC  Trade Name, if any.  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houston  State Texas ZIP Code + 4 77249-8653  A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  7.a. Nature of Interest, Transaction, or Income.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.	Trade Name, if any:	her behalf
Street 454 Link Rd.  CRy Houston State Texas ZIP Code + 4 77249-8653  A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seaking to represent.  8. Name and address of Employer (including trade name if amy).  Name Houston Area Plumbing JAC Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  CRy Houston State Texas ZIP Code + 4 77249-8653  A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name Trade Name, if any:  P.O. Box, Bidg., Room No., if any  7.a. Nature of interest, Transaction, or Income.  7.a. Nature of Interest, Transaction, or Income.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.		
State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name Rouston Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houston  State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  7.b. Amount.  7.b. Amount.  7.c. Nature of Interest, Transaction, or Income.	P.O. Box, Bidg., Room No., if any PO Box 8653	7.b. Amount.
State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if arry).  Name Houseton Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houseton  State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  7.b. Amount.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.	Street 454 Link Rd.	
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  Name Houston Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houston  State Texas  ZIP Code + 4 77249 - 8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  7.b. Amount.  7.a. Nature of interest, Transaction, or income.  7.a. Nature of interest, Transaction, or income.	City Houston	\$580
employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  Name Houston Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houston  State Texas Zip Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  7.a. Nature of Interest, Transaction, or Income.	State Texas ZIP Code + 4 77249-8653	
employees your organization represents or is actively seeking to represent.  8. Name and address of Employer (including trade name if any).  Name Houston Area Plumbing JAC  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houston  State Texas Zip Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  7.a. Nature of Interest, Transaction, or Income.		
Name Houston Area Plumbing JAC Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houston State Texas ZIP Code + 4 77249 - 8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  1/1/2004 - 12/31/2005- Kristi LaBroski (spouse) Employer Taxes & Contributions / Social Security paid on her behalf  7.b. Amount.		
Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO Box 8653  Street 454 Link Rd.  City Houston  State Texas ZIP Code + 4 77249 - 8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  T.b. Amount.	6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Trade Name, if any:  P.O. Box, Bkig., Room No., if any PO Box 3653  7.b. Amount.  Street 454 Link Rd.  City Houston  State Texas ZIP Code + 4 77249 - 8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  7.b. Amount.	Name Houston Area Plumbing JAC	Employer Taxes & Contributions / Social Security
Street 454 Link Rd.  City Houston State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  7.b. Amount.	Trade Name, if any:	paid on her behalf
Street 454 Link Rd.  City Houston State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name Trade Name, if any:  P.O. Box, Bidg., Room No., if any  Street  7.b. Amount.	Do Double Dec No West Co.	
Street 454 Link Rd.  City Houston  State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  7.b. Amount.	P.O. Box, Biog., Room No., Fany PO Box 8653	7 h Amount
State Texas ZIP Code + 4 77249-8653  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  7.b. Amount.	Street 454 Link Rd.	P. D. Philosoft
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  7.b. Amount.	City Houston	\$2,480
employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name if any).  Name  Trade Name, if any:  P.O. Box, Bidg., Room No., if any  7.a. Nature of Interest, Transaction, or Income.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.	State Texas ZIP Code + 4 77249-8653	
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  7.b. Amount.		
P.O. Box, Bldg., Room No., if any  7.b. Amount.	6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
P.O. Box, Bldg., Room No., if any 7.b. Amount.	Name	
7.b. Amount.	Trade Name, if any:	
Street	P.O. Box, Bldg., Room No., if any	
		7.b. Amount.
City	Street	
	City	
State ZIP Code + 4	State ZIP Code + 4	